

CLAIMS ONLY

SERIAL NO.

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	* IND. DEP.		* IND. DEP.		* IND. DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
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TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.
09/820468

APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT										
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
10 1		1					61								
10 2		1					62								
10 3		1					63								
10 4		1					64								
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TOTAL IND.							TOTAL IND.								
TOTAL DEP.							TOTAL DEP.								
TOTAL CLAIMS							TOTAL CLAIMS								